

Exhibit F

MetLife

Memo

Contestable Death Claim

Dr. Zamarippa, Medical Director☒ Ms. Shelby Lyons, Personal InsuranceName Bang C. Lin Policy Number 204 126 416 ETUnderwriting Classification Preferred NSCause of death: Respiratory
Failure, Pneumocystis Carinii
Pneumonia and Stage IV
Gastric Carcinoma

Temporary Insurance Agreement effective date

Date of Death 08/11/2006Amount \$ 1,000,000.00State CA

Note particularly the following treatment tabbed in the attached file:

(Approver: Specify below dates and places of treatment.)

8/7/04 - HBV, 03/27/04 - Abdominal Ultrasound

Please review and answer question 1. Thanks.

SHELBY LYONS

JAN 23 2007

DEATH CLAIMS

1. ☒ Note: Any undisclosed medical treatment, attention or history prior to 08/18/2004 is material.
(Effective Date)

(a) Based on the additional information obtained dated prior to the effective date do you agree with the underwriting rating?
(check one) Yes ☐ No ☐

(b) At the time of underwriting, if you had this additional information available would you have suggested that this policy have been

☐ Approved as Issued ☒ Not Approved as Issued (different policy rating) ☐ Declined

☐ Postponed ☐ Requested additional information

If the policy would have been declined, not approved as issued, or postponed, or we would have requested additional information, please explain what specific medical treatment, attention, condition or history in the file that would cause such a decision

Hx of hepatitis B tx with Interferon in 1998. Dx of chronic hepatitis B in march 04.

2. ☐ Based on the statements in the application, information in the file and any other tabbed material available to the underwriter, were we correct in accepting this risk as issued?

☐ Yes ☐ No (please explain)

3. ☐ Is there a clear and demonstrable causal connection between the reason for the underwriting classification and death?
☐ Yes ☐ No

4. ☐ Did the medical history on which you would have declined, not approved as issued, or postponed the application in the same underwriting classification actually contribute to the cause of death?

☐ Yes ☐ No

2231-SC (12-98) WCSC

D. Zamarippa
Medical Director

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This Life Administration procedure is only controlled until 4:00:26 PM on 01/23/2007. For a controlled version, please access this document electronically.

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